## **Application Data Sheet**

## **Application Information** Application number:: 07/28/03 Filing Date:: Application Type:: Regular Subject Matter:: Utility Suggested classification:: Suggested Group Art Unit:: CD-ROM or CD-R??:: Number of CD disks:: Number of copies of CDs:: Sequence Submission:: Computer Readable Form (CRF)?:: Number of copies of CRF:: Title:: FOOD KIT FOR COMPONENTS OF CHILLED AND FROZEN DESSERTS 020903-014710US Attorney Docket Number:: Request for Early Publication:: No Request for Non-Publication:: No Suggested Drawing Figure:: **Total Drawing Sheets:** 9 Small Entity?:: No Latin name:: Variety denomination name:: Petition included?:: No Petition Type:: Licensed US Govt. Agency:: Contract or Grant Numbers One:: Secrecy Order in Parent Appl.:: No

Page 1 Initial 7/28/03

## **Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Michael

Middle Name:: J.

Family Name:: Vincent

Name Suffix::

City of Residence:: Dublin

State or Province of Residence:: CA

Country of Residence:: US

Street of Mailing Address:: 3338 Oak Bluff Lane

City of Mailing Address:: Dublin

State or Province of mailing address:: CA

Country of mailing address::

Applicant Authority Type::

Inventor

Primary Citizenship Country::

US

Status::

**Full Capacity** 

Given Name::

Robert

Middle Name::

W.

Family Name::

Martin

Name Suffix::

Jr.

City of Residence::

San Ramon

State or Province of Residence::

CA

Country of Residence::

US

Street of Mailing Address::

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City of Mailing Address::

San Ramon

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CA

Country of mailing address::

Applicant Authority Type::

Inventor

Primary Citizenship Country::

US

Status::

**Full Capacity** 

Given Name::

Rachelle

Middle Name::

M.

Family Name::

Smeester-Karpeles

Name Suffix::

City of Residence::

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State or Province of Residence::

CA

Country of Residence::

US

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Hayward

State or Province of mailing address::

CA

Country of mailing address::

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Dana

Middle Name:: M.

Family Name:: Morris

Name Suffix::

City of Residence:: Walnut Creek

State or Province of Residence:: CA

Country of Residence:: US

Street of Mailing Address:: 371El Divisadero

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Country of mailing address::

Applicant Authority Type::

Inventor

Primary Citizenship Country::

US

Status::

**Full Capacity** 

Given Name::

Alger

Middle Name::

C.

Family Name::

Marable

City of Residence::

Antioch

State or Province of Residence::

CA

Country of Residence::

US

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City of Mailing Address::

Antioch

State or Province of mailing address::

CA

Country of mailing address::

Postal or Zip Code of mailing address:: 94509

**Correspondence Information** 

Correspondence Customer Number::

20350

Repr sentative Information

Representative Designation::

Representative Number::

Representative Name::

Primary **Associate** 

35,933

James G. Gilliland, Jr.

Kevin T. LeMond

**Domestic Priority Information** 

Application::

Continuity Type::

Parent Application:: Parent Filing Date::

This Application

An Appn claiming

60/399,857

07/31/2002

benefit under 35 USC

119(e) of

**Foreign Priority Information** 

Country::

Application number::

Filing Date::